2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2008
Secretary of State

DOCUMENT# N97000006206

Entity Name: KNANAYA CATHOLIC ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

11220 TRADE WIND WAY
COOPER CITY, FL 33026

New Principal Place of Business:

Current Mailing Address:

11220 TRADEWIND WAY
COOPER CITY, FL 33026

New Mailing Address:

FEI Number: 65-0792134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

IDICULLA, BABYCHAN
6906 E WEDGEWOOD AVENUE
DAVIE, FL 33331 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SIMON, ABRAHAM P
Address: 11220 TRADE WIND WAY
City-St-Zip: COOPER CITY, FL 33026 US

Title: S ( ) Delete
Name: CHANASSERIL, SIBY J
Address: 1301 N 47 TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: VP ( ) Delete
Name: OTTAPPALLIL, STEPHEN
Address: 11122 BOSTON DR
City-St-Zip: COOPER CITY, FL 33026

Title: T ( ) Delete
Name: MANGATTU, MOLLY
Address: 5031 SW 90 TH AVE
City-St-Zip: COOPER CITY, FL 33328 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: JOSEPH, PAUL
Address: 15320 NW 6 CT
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: JS (X) Change ( ) Addition
Name: ABRAHAM, LISSY
Address: 15121 MEADHAVEN STREET
City-St-Zip: DAVIE, FL 33331 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOLLY MANGATTU D 07/18/2008

Electronic Signature of Signing Officer or Director — Date